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PTO/SB/50 (02-01)  
Approved for use through 01/31/2004. OMB 0651-0033  
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### REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

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Box Reissue  
Washington, DC 20231

Attorney Docket No.	740819-617
First Named Inventor	Kenji ORITA
Original Patent Number	6,117,700
Original Patent Issue Date (Month/Day/Year)	September 12, 2000
Express Mail Label No.	

APPLICATION FOR REISSUE OF: ☒ Utility Patent ☐ Design Patent ☐ Plant Patent

#### APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format (*amended, if appropriate*)
4. ☒ Drawing(s) (*proposed amendments, if appropriate*)
5. ☒ Reissue Oath/Declaration (original or copy)  
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No  
(If Yes, check applicable box(es))
  - ☒ Written Consent of all Assignees (PTO/SB/53)
  - ☒ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission  
(If applicable, all of the following are necessary)
  - a. ☐ Computer Readable Form (CFR)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

#### ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all changes to the claims. See 37 CFR 1.173(c).
11. ☐ Original U.S. Patent for surrender
  - ☐ Ribboned Original Patent Grant
  - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119) (If applicable)
13. ☒ Information Disclosure ☒ Copies of Statement (IDS)/PTO-1449 Citations
14. ☐ English Translation of Reissue Oath/Declaration (If applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
17. Other: Offer to Surrender Patent

#### 18. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 22204 or ☐ Correspondence address below  
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Name

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City

State

Zip Code

Country

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NAME (Print/Type)

Eric J. Robinson

Registration No. (Attorney/Agent)

38,285

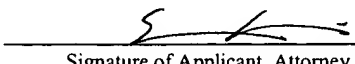
Signature

Date

11-13-01

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 740819-617		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 15	Total Claims (37 CFR 1.16(j))	(B) 15	**** 0 =	X \$	=	or	X \$ =	
(C) 2	Independent Claims (37 CFR 1.16(i))	(D) 2	* 0 =	X \$	=		X \$ =	
Basic Fee (37 CFR 1.16(h)) \$							\$ 740	
Total Filing Fee \$							OR \$ 740	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 43	MINUS	** 20	* = 23	X \$	=	X \$ 18 =	414
Independent Claims (37 CFR 1.16(i))	*** 6	MINUS	***** 3	= 3	X \$	=	X \$ 84 =	252
Total Additional Fee \$							OR \$ 666	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>19-2380</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>1,406.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>								
<u>11-13-01</u> Date				 Signature of Applicant, Attorney or Agent of Record				
				<u>Eric J. Robinson</u> Typed or printed name				

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Certified Extract Copy of Register

1. Corporate name            MATSUSHITA ELECTRIC INDUSTRIAL CO., LTD.

1. Head office              1006, Oaza Kadoma, Kadoma-shi, Osaka

1. An article of registration as of April 4, 2001 ..

(1) MATSUSHITA ELECTRIC INDUSTRIAL CO., LTD. has merged  
MATSUSHITA ELECTRONICS CORPORATION, 1-1, Saiwai-cho,  
Takatsuki-shi, Osaka.

blank space below

The above description is a certified extract copy of the register.

May 1, 2001

Moriguchi branch office of Osaka Legal Affairs Bureau

Greffier      MIYAMOTO, Hisatake [seal]

09986997-111301  
T00TTF"26698650

登 記 簿 抄 本

1. 商 号 松 下 電 器 産 業 株 式 会 社

1. 本 店 大 阪 府 門 真 市 大 字 門 真 1 0 0 6 番 地

1. 平成 1 3 年 4 月 4 日 登 記 事 項

大 阪 府 高 槻 市 幸 町 1 番 1 号 松 下 電 子 工 業 株 式 会 社 を 合 併

以 下 余 白

上 記 は 登 記 簿 の 抄 本 で あ る 。

平成13年5月1日

大 阪 法 務 局 守 口 出 張 所

登 記 官 宮 本 尚 武

0986997-111304